PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the experioris Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2005  Applicant claims small entity status. See 37 CFR 1.27		Complete if Known						
		Application Number	09/427,300-Conf. #2979					
		Filing Date	October 26, 1999					
		First Named Inventor	Tom Q. Wellbaum					
		Examiner Name	T. H. Phan					
		Art Unit	2661					
TOTAL AMOUNT OF PAYMENT (\$) S	910.00	Attomey Docket No.	4450-0149P					
-								

TOTAL AMOUNT OF PAYMENT	(\$) 910.00	Attomey D	ocket No.	4450-0149P					
METHOD OF PAYMENT (check all that apply)									
x Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below.									
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND E			-C	AINIATION EEES					
FI	LING FEES Small Entity	SEARCH FEI		INATION FEES  Small Entity	,				
Application Type Fee (\$		Fee (\$) Fee			Fees Pai	<u>id (\$)</u>			
Utility 300	150	500 250	0 200	100					
Design 200	100	100 50	0 130	65					
Plant 200	100	300 150	0 160	80					
Reissue 300	150	500 250	0 600	300					
Provisional 200	100	0	0 0	0					
2. EXCESS CLAIM FEES					_	mall Entity			
Fee Description Each claim over 20 (including Reiss	ouac)				<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25			
Each independent claim over 3 (incl					200	100			
Multiple dependent claims	dumg resissaes)				360	180			
	Total Claims			Fee Paid (\$)					
						_			
Indep. Claims Extra Claims	Fee (\$)	Fee Paid (\$)	_						
	× =		<del>.</del>						
3. APPLICATION SIZE FEE									
If the specification and drawings endistings under 37 CFR 1.52(e)),	kceed 100 sheets of	paper (excluding	electronically	filed sequence or	computer				
sheets or fraction thereof. See 3	tile application size	3) and 37 CFR 1.	16(s).	charty) for cach a	idditional 50				
Total Sheets Extra Shee		each additional 50		reof Fee (\$)	Fee Pa	aid_(\$)			
- 100 =	_	(round up to			=				
4. OTHER FEE(S)	_				Fees Pa	aid (\$)			
Non-English Specification, \$13	0 fee (no small entit	ty discount)							
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00 1251 Extension for response within first month 120.00									
	1251 Extension	tor response wi	unin tirst mon	un	120	.00			
SUBMITTED BY		Pegistration	No						

SUBMITTED BY				
Signature	Registration No. (Attorney/Agent)	39,491	Telephone	(703) 205-8000
Name (Print/Type) Michael R. Cammarata			Date	June 16, 2005

MRC/JWR/cdr